U Department of Labor
Office of Labor-Management

Standards
Washington DC 20210

For Official Use Only

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

rorm approved
Office of Management
and Budget
No. 1215 0188
Expires 11 30 2006

This report is mandatory under P L 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

| READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT   |  |  |
|--|--|--|
| E  |  |  |
|  |  |  |
| 1 File Number U 9935   | 2 Fiscal Year Covered From                           |  |
|  | 1 1 011 1 04. Through 12 31 04                       |  |
| 3 Name and address of person filing  | 4 Name file number and address of labor organization |  |
| Name Christopher H Brown   | Name Laborers Local 809                              |  |
|  | Labor Organization File Number 020391                |  |
| P O Box, Bldg Room No if any   | PO Box Building and Room Number if any) PO Box 67    |  |
| Street 3707 County Road 15   | Street 306 Adams St                                  |  |
| City Rayland -   | City Steubenville                                    |  |
| State ZIP Code + 4 43943_  | StateOhio ZIP Code + 4 _ 43952                       |  |
| 5 Position in labor organization Secretary-Treasurer   |  |  |
| Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  |  |  |
| A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.   |  |  |
| 6 Name and address of Employer (including trade name if any)   | 7 a Nature of Interest Transaction or Income         |  |
| Name   |  |  |
| Trade Name If any  | í  |  |
| P O Box Bldg Room No if any  | 7 b Amount.  |  |
| Street   |  |  |
| Crty   |  |  |
| State ZiP Code + 4   |  |  |
| Signature  |  |  |
| 15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions.) |  |  |
| Signed XX Onity & Brown  | on 8/10/05 740-282-0771                              |  |
|  | Date Telephone Number                                |  |

| Name of Person Filing Christopher H Brown  | File Number U                                   |
|--|---|
| B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested |   |
| 8 Name and address of Business (Including trade name if any)   | 9 Business deals with                           |
| Name   | a Labor Organization                            |
| Trade Name II any  | b Trust   |
| P O Box, Bldg Room No If any   | c. Employer                                     |
| City   |   |
| State ZIP Code + 4   |   |
| 10 If 9.b or 9 c. is checked give trust or employer's name   | 11 a Nature of such dealing                     |
| Name ]   |   |
| Trade Name if any  |   |
| P O Box Bidg Room No., if any  |   |
| Street L.  | 11.b Approximate dollar value of such dealing   |
| Crty   | 12 a Nature of interest held or income received |
| State ZIP Code + 4   |   |
|  |   |
|  |   |
| ,  | 12 b Amount                                     |
| C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value   |   |
| 13.a Name and address of Employer or Labor Relations Consultant (including trade name if any).   | 14 a Nature of payment.                         |
| Name Stewart C. Miller Co., Inc.   | Christmas Gift Popcorn/Dec 04                   |
| Trade Name if any  | \$ 24 00<br>\$ 7 00                             |
| P O Box, Bldg Room No If any   | total \$3100                                    |
| Street 2111 West Lincoln Hwy.  |   |
| City Merrillville  | 1   |
| State Indiana ZIP Code + 4 46410   |   |
| 13 b is the Business an Employer XX or Consultant 7  | 14 b Amount of payment.                         |

## ADDENDA TO THE LM-30 WHICH IS TO BE INCORPORATED AND MADE PART OF THE LM-30 FORM

Addendum A (Unsolicited Holiday Gifts)

On one occasion in Dec 2004 during the holiday season, I recall I was given a complimentary item (popcorn). At no time did I solicit the item and it was sent to my home address without my prior knowledge or authorization. The item was disposed of My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because if it is perishable, the item may at the discretion of the employee supervisor or agency ethics official, be given to an appropriate charity, shared within the recipients office or destroyed."

C. F. R. 2635 205

Charles W Spann